

North Carolina Division of Marine Fisheries APPLICATION FORM FOR ISSUABLE PERMITS

Select C	Select One:									
Individual (complete the Individual Participant Information below)										
□ B:	usiness Agent (complete	the Busine	ess Participant Information	on <u>and</u> In	dividual Parti	cipant Inforn	nation belov	v)		
Individ	ual Participant Informa	tion								
	First Name	Mic	ldle Name	Last	Name	Partic	ipant I.D.	Date of Birth		
								/ /		
Busines	Business Agent Information									
	Business	Name		Business	Agent Name	(First, MI, L	ast)	Participant ID		
PERM	PERMIT CATEGORIES									
Stripe	d Bass Dealer Permit				Current Perm	it#				
	New		Renew		Upda	ate		Replace		
	Atlantic Ocean		ASMA		Central/Sout	hern Area				
(Contact Person (First, MI,	Last)	Contact Perso	on Date of	f Birth	Con	ntact Person	act Person Telephone #		
			MO. / I	DAY /	YR.	()				
Dealer	#		Dealer #	Dealer#		Dealer #				
Atlantic Ocean Flounder Dealer Permit Current Permit #										
	New		Renew	Upda		te		Replace		
	Contact Person (First, MI,	Last)	Contact Perso	on Date of			ntact Person	Telephone #		
			мо. / г	DAY /	y / yr.		()			
Dealer # Dea			Dealer #	or# Dealer#						
Spiny	Dogfish Dealer Permit			Current Permit #						
	New		Renew		Upd			Replace		
	Contact Person (First, MI, Last) Contact Person			on Date of	f Birth	Con	Contact Person Telephone #			
			MO. / I	DAY /	YR.	()	l			
Dealer #			Dealer#		Dealer#					
Black	Sea Bass – North of Cap	e Hattera	s Dealer Permit	Current Permit #		it #				
	New		Renew		Upd	ate		Replace		
Contact Person (First, MI, Last)			Contact Person Date of Birth			Contact Person Telephone #				
			мо. / г	MO. / DAY / YR.			()			
Dealer #			Dealer #			Dealer #				

Blue Crab Shedding Permit					Current Permit #			it#		
	New		Rene	W			Update			Replace
Number of Tanks or Floats by System:			Peelers obtained by:		Faci		Facility Lo	acility Location:		
Closed Recirculating				Catches Own		Address 1:				
Flow-through				Purchases from Others		Address 2:				
Floating			Both		City & County:					
Other (Describe System):							State	e & Zip:		
Contact Person (First, MI, Last)			Contact Person Date of Birth			Contact Person Telephone		rson Telephone #		
			/ 54			()			

					Current Permi	t #			
Horseshoe Crab Biomedical Use Permit			Report filed by February 1st?			YES		NO	
	New		Renew		Update				Replace
Contact Person (First, MI, Last) Contact Person			n Date of	Birth	Co	ntact Per	rson Tele	ephone #	
			MO. / DA	, /	YR.	())		

Monkfish Large Mesh Gill Net Po		Current Perm	it#					
New		Renew		Upd	ate		Replace	
Contact Person (First, MI, Last) Contact Person			n Date of Birth Co			ntact Person Telephone #		
MO. / DAY			/	YR.	()		
Vessel I.D. (P Number) Crew Members (First, MI, Last):			Date of Birth				Telephone #	
	(1)		MO. / DAY / YR.					
SCFL or RSCFL License No.	(2)		MO.	/ DAY	/ YR.			
	(3)		мо.	/ DAY	/ YR.			



North Carolina Division of Marine Fisheries

MARKE	O STATE OF THE STA	License or Permit Application Certification Form (REV 04/2021)	PID # License #
Се	rtification S	tatement (This section must be completed by Applicant)	
I, _		certify that:	DMF License Clerk:
1.	documenta documents result in ter	mation provided on this application and any supporting tion provided is true, accurate, and complete. And further, for rer have been provided at the time of renewal. I understand that any mination of appropriate licenses, permits and related documents and other privileges, and in possible criminal prosecution.	false information or fraudulent disclosures may
2.	I am a resid	lent of the State of:	
	If claiming r	resident status in North Carolina, I certify further that (check one)	:
		I have been a legal resident for more than six months, or	
		If domiciled in North Carolina between 60 days and six months application a notarized Certificate of Eligibility for North Carolin	
3.		for a Standard or Retired Standard Commercial Fishing License appropriate entry)	as a North Carolina Resident, I also certify that:
		I filed a North Carolina State Income Tax Return for the previous	ous calendar or tax year.
		I was not required to file a North Carolina State Income Tax R	eturn for the previous calendar or tax year.
		d if there are any questions regarding the filing of a North Carolir propriate tax records, as requested by the Division of Marine Fish	
4.	For comme	rcial fishing licenses, permits, endorsements or registrations I ce	rtify that:
		ntly have no marine fisheries licenses, permits, endorsements, or e privilege to hold such licenses, permits, endorsements, or regis	
		not been convicted of four or more violations in any jurisdiction rengeles or related to marine or estuarine resources during the previous	
	condition informa	stand that as a condition of accepting a permit from the Division ons of the permit and agree, that if conditions of the permit as ideation was provided in the application for initial issuance, renewal d by the Fisheries Director.	entified for the permit are violated, or if false
5.	governing a hardbound.	Statute §113-221 requires the NC Division of Marine Fisheries to activities authorized by the license you are purchasing. You have The document is available on the Division of Marine Fisheries votal.ncdenr.org/web/mf/rules-and-regulations.	e the right to request a current rulebook in
6.		fishing licenses and endorsements, I affirm that I have liability instrements for the vessel(s) used in the operation in accordance wit	
7.		n is for a Standard/Retired Commercial Fishing License with a S nts I affirm that I have received the required harvester training.	hellfish Endorsement or a Shellfish License for
8.	For Ocean	Fishing Pier License, linear length of the pier has not changed.	
9.	If applying f	for a Land or Sell License, I also certify that: (check the appropria	ate entry)
		I have a commercial fishing license issued by the state of _	(Other than North Carolina).
		I have a federal permit that allows commercial fishing.	
Sig	gnature of Ap	plicant:	Date:
		NEW applications must be notarized)	
		County:	
Sw No	/orn to and S tary Public:_	ubscribed before me this day of My Commission expires:	,

OFFICE USE ONLY Year_